


## APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

<b>Title of Invention</b>	SELF-CONTAINED CASSETTE MATERIAL CUTTER AND METHOD OF CUTTING		
Application Type : regular, utility			
Attorney Docket Number : FIS920040048US1			
Correspondence address:			
Customer Number:		29505	
Inventors Information:			
<u>Inventor 1:</u>			
<b>Applicant Authority Type:</b>	Inventor		
<b>Citizenship:</b>	US		
<b>Given Name:</b>	Michael		
<b>Middle Name:</b>	J.		
<b>Family Name:</b>	Weiss		
<b>Residence:</b>			
<b>City of Residence:</b>	East Jewett		
<b>State of Residence:</b>	NY		
<b>Country of Residence:</b>	US		
<b>Address-1 of Mailing Address:</b>	PO Box 73		
<b>Address-2 of Mailing Address:</b>	Route 23C		
<b>City of Mailing Address:</b>	East Jewett		
<b>State of Mailing Address:</b>	NY		
<b>Postal Code of Mailing Address:</b>	12424		
<b>Country of Mailing Address:</b>	US		
<b>Phone:</b>			
<b>Fax:</b>			
<b>E-mail:</b>			
<u>Inventor 2:</u>			
<b>Applicant Authority Type:</b>	Inventor		
<b>Citizenship:</b>	US		
<b>Given Name:</b>	Sean		
<b>Middle Name:</b>	A.		

**Family Name:** Allen  
**Residence:**  
**City of Residence:** Hopewell Junction  
**State of Residence:** NY  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 5803 Chelsea Cove North  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Hopewell Junction  
**State of Mailing Address:** NY  
**Postal Code of Mailing Address:** 12533  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

Inventor 3:

**Applicant Authority Type:** Inventor  
**Citizenship:** US  
**Given Name:** Vladimir  
**Family Name:** Jambrih  
**Residence:**  
**City of Residence:** Kingston  
**State of Residence:** NY  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 855 Dewitt Lake Road  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Kingston  
**State of Mailing Address:** NY  
**Postal Code of Mailing Address:** 12401  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

Assignee 1:

**Organization Name:** International Business Machines Corporation  
**Address-1 of Mailing Address:** New Orchard Road  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Armonk  
**State of Mailing Address:** NY  
**Postal Code of Mailing Address:** 10504

**Country of Mailing Address:**

US

**Phone:**

**Fax:**

**E-mail:**